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APPLICANTS

Neal O'Gorman, Dublin, IRELAND;
 Ronan O'Dowd, Dublin, IRELAND;

**** CONTINUING DATA *******

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**** FOREIGN APPLICATIONS *******

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**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY ****

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35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		IRELAND	7	29	3

ADDRESS

SEYFARTH SHAW LLP
 131 S. DEARBORN ST., SUITE 2400
 CHICAGO, IL 60603-5803
 UNITED STATES

TITLE

Optical wavelength meter

FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit